## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:    X	I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).							
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):    Name								
Practitioner(s) named below (if more than ten patient practitioners are to be named, then a customer number must be used):    Name	X Practitioners associated with the Customer Number:				26111			
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications essigned only to the undersigned seconding to the USPTO assignment records or assignment documents ettached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:    Year   The address associated with Customer Number:   26111	OR							
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The address associated with Customer Number:  OR  Firm or Individual Name Address  City  Country  Telephone  Assignee Name and Address:  ASML Netherlands B.V.  De Run 6501  NL-5504 DR Veldhoven The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/98 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Signature  Date 16 April 2007  Telephone	Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
The address associated with Customer Number:  OR  Firm or Individual Name Address  City  Country  Telephone  Assignee Name and Address:  ASML Netherlands B.V.  De Run 6501  NL-5504 DR Veldhoven The Netherlands  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/98 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.  SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Signature  Date 16 April 2007  Telephone	r		•		C111			
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Individual Name   Sterne, Kessler, Goldstein & Fox P.L.C.   Address   City   State   Zip     Country   Telephone   Email     Assignee Name and Address:   ASML Netherlands B.V.     De Run 6501   NL-5504 DR Veldhoven   The Netherlands     A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/98 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.    Signature   Date 16 April 2007     Name   Antonius Joseph Marie van Hoef, Esq.   Telephone								
Country Telephone Email  Assignee Name and Address:  ASML Netherlands B.V. De Run 6501 NL-5504 DR Veldhoven The Netherlands A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee  Signature  Date 16 April 2007 Telephone	individual Name   Sterne, Kessler, Goldstein & Fox P.L.L.C.							
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Signature Date 16 April 2007 Name Antonius Joseph Marie van Hoef, Esq. Telephone	SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Name Antonius Joseph Marie van Hoef, Esq. Telephone	////): /						2007	
Title Vice President and Chief Intellectual Property Counsel		Antoning	Joseph Marie van Hoef B	isa.	Те		4×11/11	
		Vice Presi	ident and Chief Intellectua	al Property Cou	ınsel			

This collection of Information is required by 37 CFR 1.31, 1.32 and 1.33. The Information is required to obtain or retain a benefit by the public which is to file (end by the USPTO to process) an application. Confidentiality is governed by 36 U.S. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1460, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.